

Advanced Pharmacist Credentialing – Assessment Regulations

These are the Regulations that govern the core advanced pharmacist, advanced pharmacist critical care and advanced pharmacist mental health credentialing assessment process. You should read them carefully, in conjunction with the advanced pharmacist credentialing candidate guidance so that you understand the procedures around the credentialing assessment process. You must abide by these Regulations.

Definitions

The following definitions will apply to these Regulations:

“Advanced pharmacist competency committee (APCC)” means a group of appropriately qualified experts as determined by the RPS who reach final decisions on individuals’ progression to being credentialed as advanced-level.

“APCC chairperson” means either an experienced APCC assessor or senior RPS representative who has undertaken additional training to chair APCCs.

“Advanced pharmacist credentialing” means the process of undertaking the programme of assessment as detailed in the RPS advanced pharmacist curriculum to become credentialed as advanced-level.

“Appeal form” means the form a candidate may choose to use to submit an appeal against the outcome of an advanced pharmacist competency committee.

“Assessment Regulatory Committee” is made up of independent pharmacist and lay representatives and is chaired by a co-opted member of the Education & Standards committee. The committee has responsibility for considering appeals made or referred to it in accordance with these Regulations.

“Assessor” means a member of the advanced pharmacist competency committee who reviews a candidate’s portfolio as part of the programme of assessment.

“Candidate” means an individual undertaking the advanced pharmacist credentialing assessment programme.

“Curriculum” means the RPS core advanced pharmacist, advanced pharmacist critical care and advanced pharmacist mental health curricula which is the statement of the intended aims and objectives, content, experiences, learning outcomes and processes of a programme, including a description of the structure, and expected methods of learning, teaching, assessment, feedback, and supervision.

“Disability” means a disability within the meaning of section 6 of the Equality Act 2010.

“The Equality Act” means the Equality Act 2010 (and any reference to a statute includes: that statute as amended from time to time; any statute re-enacting or replacing it; and any statutory instruments, Regulations or rules made under that statute or any statute re-enacting or replacing it).

“Education & Standards committee” means the committee responsible for the overarching quality assurance of all RPS assessment and credentialing activity.

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“**Head of Assessment & Credentialing**” means the Head of Assessment & Credentialing at the RPS or their nominee.

“**Programme of assessment**” means the set of individual assessments used to assess the curriculum outcomes. The synthesis of these individual assessments into a programme allows for integrated judgments on an individual’s performance.

“**Programme of learning**” means the matrix of the capabilities, outcomes and descriptors defined in the RPS advanced pharmacist curriculum determined as necessary to deliver the services defined by the RPS core advanced pharmacist, advanced pharmacist critical care and advanced pharmacist mental health curricula purpose.

“**RPS**” means the Royal Pharmaceutical Society.

“**RPS Website**” means the dedicated website of the Royal Pharmaceutical Society found at the following address: <https://www.rpharms.com/>.

“**Senior RPS representative**” means a senior member of the RPS staff or RPS governance structure as determined by the Chief Education & Membership Officer.

Scope

1. These Regulations apply from 2 May 2023.

Language of the advanced pharmacist credentialing process

2. All aspects of the advanced pharmacist credentialing process will be carried out in the English language.

Submitting a portfolio

3. Before an individual submits a portfolio, they must have:
 - a) Uploaded and mapped evidence of learning against each of the curriculum learning outcomes.
 - b) Completed the advanced pharmacist credentialing application form.
 - c) Paid the portfolio assessment fee.
4. In order for the portfolio to be processed by the RPS and forwarded for review by an advanced pharmacist competency committee, the portfolio assessment fee must be paid.
5. Portfolios must be submitted by the relevant assessment window submission deadline to be considered by a corresponding advanced pharmacist competency committee. Submission window and deadlines are available on the [RPS website](#).
6. A candidate may submit for assessment of (an) individual domain(s). Individuals will only be credentialed as advanced once all domains have been successfully assessed. Candidates who submit for advanced pharmacist critical care or advanced pharmacist mental health alone will have to complete core advanced and meet the

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standard in order to achieve advanced credentialling. Candidates wishing to submit for assessment of (an) individual domain(s) may submit an application by email or any other appropriate form, setting out the domain(s) in which they wish to be assessed.

7. If a candidate is a person with a disability and requires reasonable adjustments to be made to the portfolio submission process, they should complete a reasonable adjustments form.

Portfolio assessment

8. Once the relevant portfolio submission deadline closes, portfolios will be checked internally by RPS staff to ensure the required documentation has been provided by the candidate.
9. RPS will convene an advanced pharmacist competency committee to review the portfolio against the outcomes detailed in the programme of learning.
10. For core advanced credentialling assessment, the advanced pharmacist competency committee membership will be comprised of a minimum of three experts with the following areas represented in its membership: Two advanced pharmacists, at least one of whom will have expertise from the candidates stated sector of practice, a pharmacist with research expertise and a pharmacist with educational expertise. The committee will be convened by the RPS and chaired by a APCC chairperson.

For pharmacists who are submitting the two critical care domains in addition to the five core advanced domains, the APCC will consist of at least three panel members fulfilling the following roles:

- Two advanced pharmacists in critical care or one advanced pharmacist in critical care and one advanced critical care professional (e.g. doctor, ACCP).
- An assessor with appropriate research expertise.
- An assessor with appropriate educational expertise.

For a pharmacist who has already credentialed as 'Core Advanced' and is submitting the two critical care domains alone, the assessment will be undertaken by an APCC which will consist of at least two panel members that fulfil the following roles:

- Two advanced pharmacists in critical care or one advanced pharmacist in critical care and one advanced critical care professional (e.g. doctor, ACCP).

For pharmacists who are submitting the two mental health domains in addition to the five core advanced domains, the APCC will consist of at least three panel members fulfilling the following roles:

- Two advanced pharmacists in mental health
- A pharmacist with appropriate research expertise
- A pharmacist with appropriate educational expertise

For a pharmacist who has already credentialed as ‘Core Advanced’ and is submitting the two mental health domains alone, the assessment will be undertaken by an APCC which will consist of at least two panel members fulfilling the following roles:

- Two advanced pharmacists in mental health
11. Prior to assessing a portfolio, members of the advanced pharmacist competency committee will be required to declare any conflicts of interest in line with the RPS conflict of interest policy. Should an assessor declare a conflict of interest, an alternative assessor will be used to assess the portfolio.
 12. Following independent review of the portfolio by each assessor, a meeting will be convened of the advanced pharmacist competency committee, either remotely or in person, where the portfolio will be discussed and unanimous consensus on the final outcome for each domain achieved.
 13. The potential outcomes for each domain are as follows:
 - **Standard met** – the individual has provided satisfactory evidence to demonstrate achievement of all the advanced pharmacist curriculum outcomes in that domain as defined in the programme of learning.
 - **Standard not met** – the individual has not provided satisfactory evidence to demonstrate achievement of all the advanced pharmacist curriculum outcomes in that domain as defined in the programme of learning. Written feedback will be provided detailing which elements of the evidence did not meet the standard and the action required to demonstrate the standard on resubmission. The candidate will be required to be reassessed in the domain(s) in which they did not demonstrate achievement of all outcomes. Reassessment will be charged according to the assessment fees in place at that time.
 - **Insufficient evidence** - the individual has not provided enough evidence to demonstrate achievement of part, or all the advanced pharmacist curriculum outcomes as defined in the programme of learning. While some of the evidence provided indicated that the individual may be practising at the expected level, there are gaps in the evidence to confidently conclude the outcome had been fully achieved. Written feedback will be provided detailing which elements of the evidence were insufficient and the action required to demonstrate the standard on resubmission. The candidate will be required to be reassessed in the domain(s) in which there was insufficient evidence. Reassessment will be charged according to the assessment fees in place at that time.
 14. The potential overall outcomes of the advanced pharmacist competency committee are as follows:
 - **Standard met**– the individual has provided satisfactory evidence to demonstrate achievement of all the advanced pharmacist curriculum outcomes as defined in the programme of learning. The candidate is credentialed as advanced pharmacist.
 - **Standard not met** – the individual has not provided satisfactory evidence to demonstrate achievement of all the advanced pharmacist curriculum outcomes

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as defined in the programme of learning. Written feedback will be provided detailing which elements of the portfolio evidence have not been met. The candidate will be required to be reassessed in the domain(s) in which they did not demonstrate achievement of all outcomes. Reassessment will be charged according to the assessment fees in place at that time.

15. All candidates will receive feedback on their submission from the advanced pharmacist competency committee regardless of the outcome of the assessment.
16. Assessment outcomes will be delivered in writing to candidates within six weeks of the corresponding submission closing date.

Cheating and misconduct during the core advanced pharmacist credentialing process

17. For the purposes of these Regulations, “cheating” in the advanced pharmacist credentialing process includes:
 - a) Falsifying evidence or information for inclusion in the portfolio.
 - b) Copying, stealing, appropriation or use of the work of another as evidence for the portfolio assessment.
 - c) Permitting or assisting another to copy or use one’s own work as evidence for their portfolio assessment.
 - d) Using, attempting to use, assisting another to use or attempting to assist another to use any other unfair, improper or dishonest method to gain advantage in any part of the assessment process.
18. For the purposes of these Regulations, “misconduct” in relation to the portfolio assessment includes writing in or attaching to any papers, or giving orally or electronically, any message or appeal to members of an advanced pharmacist competency committee with the intention of influencing their decision.
19. Where a member of RPS staff, a member of the advanced pharmacist competency committee or other complainant suspects a candidate of misconduct, they should report the matter promptly in writing, by letter or email, to the Head of Assessment & Credentialing.
20. Upon receipt of an allegation of misconduct, the Head of Assessment & Credentialing will decide upon examination of the initial evidence whether the allegation should be investigated and, if so, what form the investigation should take.
21. The Head of Assessment & Credentialing will write to the candidate informing them that the allegation has been received and what will happen next, including (but not necessarily limited to):
 - a) Whether:
 1. The allegation will be investigated to obtain more details before it is referred to the Assessment Regulatory Committee; or

2. The allegation will be referred straight to the Assessment Regulatory Committee with such details as are available; or
3. No action will be taken by the RPS in relation to the allegation.

and (if relevant)

- b) Requesting a written statement from the candidate of observations on the allegation.
22. If the Head of Assessment & Credentialing decides that it is appropriate to investigate the allegation before it is referred to the Assessment Regulatory Committee, they will conduct the investigation with an independent pharmacist appointed by the RPS.
23. The investigation by the RPS will depend on the nature of the allegations raised:
- a) The investigation will include consideration of the RPS's written observations and may include obtaining written and/or oral evidence from the complainant, the candidate, and/or other persons and examine other evidence and other written materials as deemed necessary by the RPS.
 - b) The length of the investigation will usually depend on the complexity and seriousness of the allegations. The investigation will be completed as efficiently as reasonably practicable. It is expected that it will normally be completed within 28 days of the letter being sent informing the candidate that an allegation has been made; however, it is recognised that this may not be possible in all cases. For the avoidance of doubt, the additional duration of an investigation over the 28-day period will not invalidate it in any way.
 - c) The RPS will make reasonable efforts to ensure the candidate and other person(s) involved are kept informed of progress. The complainant may also be kept informed, depending upon their interest in the matter and at the discretion of the RPS.
24. At the end of the investigation, the details of the investigation, including the candidate's written observations on the findings and any recommendations of the investigators, will be referred to a meeting of the Assessment Regulatory Committee. For the avoidance of doubt, the Assessment Regulatory Committee members are not bound to follow the investigators' recommendations.
25. Upon receipt of details of a case, the Assessment Regulatory Committee will meet in private to decide, based on the documents before it, whether there is a case to answer.
- a) If they decide there is no case to answer, no further action will be taken by the RPS.
 - b) If they decide there is a case to answer, the application will not be forwarded for review by the advanced pharmacist competency committee and the portfolio will need to be resubmitted at a future committee.

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26. The candidate will be informed in writing of the decision of the members of the Assessment Regulatory Committee. The complainant may also be informed, depending upon their interest in the matter and at the discretion of the RPS.

Reasonable adjustments

27. The RPS will make reasonable adjustments to the advanced pharmacist credentialing process in accordance with section 20 of the Equality Act 2010 for any candidate who is a Disabled Person.
28. Any candidate who is a Disabled Person and feels that the arrangements for the portfolio assessment will cause them a substantial disadvantage as a result of their disability, may apply within a reasonable timeframe for reasonable adjustments to be made. The candidate may use the [Reasonable Adjustments](#) form provided or may submit an application in writing by email or in any other appropriate form, setting out:
- a) The nature of the candidate's disability, together with supporting medical evidence and/or an educational psychologist's report registered with the appropriate healthcare regulator and written after the candidate's 18th birthday; and
 - b) The adjustment(s) the candidate wishes to be made (if identifiable).
29. Where a candidate does not apply under Regulation 27, but the RPS is nevertheless aware that the candidate is a Disabled Person, the Head of Assessment & Credentialing shall consider whether it is necessary for any reasonable adjustments to be made to the portfolio assessments in order to prevent that candidate from experiencing any substantial disadvantage as a result of their disability.
30. For the purposes of making a decision, the Head of Assessment & Credentialing may request additional information from:
- a) The candidate
 - b) The candidate's educational and/or practice supervisor (providing the candidate has given consent)
 - c) The candidate's expert mentor(s) (providing the candidate has given consent)
 - d) The candidate's medical practitioner(s) (providing the candidate has given consent)
 - e) Any other person whom the Head of Assessment & Credentialing at their absolute discretion considers appropriate (providing the candidate has given consent)
31. The Head of Assessment & Credentialing shall notify the candidate of the outcome of the review with reasons, and confirmation of any reasonable adjustments which will be put in place for the candidate's assessment by email, or by such other means as may be appropriate, as soon as reasonably practicable.

32. Any candidate who is dissatisfied with the Head of Assessment & Credentialing's decision as notified under Regulation 30 may ask for the Assessment Regulatory Committee to review the matter. Any request for a review should be made in writing or email or by such other means as may be appropriate as soon as reasonably practicable.
33. Following receipt of a request for a review under Regulation 31 or the RPS having become aware that the candidate is a Disabled Person under Regulation 28:
 - a) The candidate shall have an opportunity to make further representations to the Assessment Regulatory Committee in person or by any other convenient means;
 - b) The Assessment Regulatory Committee may request additional information from those individuals referred to in Regulation 28; and
 - c) The Assessment Regulatory Committee shall decide whether it is necessary for any reasonable adjustments to be made and, if so, what adjustments, if any, can reasonably be made.
34. The RPS shall notify the candidate of their decision and reasons including details of what adjustments, if any, can reasonably be made in writing or by such other means as may be appropriate as soon as reasonably practicable.
35. Subject to compliance with the Equality Act, nothing in Regulations 26-33 above shall be read as implying that the RPS will allow any adjustment to the assessment standard of the assessment on the grounds of disability.
36. The RPS will not consider any request from a candidate for reasonable adjustments on the basis of temporary personal circumstances (which are not a disability under the Equality Act) which the candidate considers might affect their ability to undertake the assessment.

Accreditation of prior certified learning (APCL)

37. The RPS may, at its discretion, give formal recognition to previous learning which has been formally assessed and for which a certificate has been awarded; this may lead to exemption from elements of the final portfolio assessment.
38. The RPS will only consider APCL applications which adhere to the following principles:
 - I. APCL will not be awarded for high-stakes curriculum outcomes. All individuals undertaking the programme will have to demonstrate achievement of all high-stakes outcomes through this curriculum's programme of assessment.
 - II. APCL will only be awarded to exempt individuals from being assessed against medium-stakes and low-stakes outcomes.
 - III. All APCL requests must be relevant, authentic, and valid.
 - IV. All APCL requests must be at the equivalent level of performance as described in this curriculum's programme of learning.

V. Patient safety must never be compromised.

39. Those who have previously undertaken the RPS Faculty assessment will be eligible for automatic APCL in line with the principles described in Regulation 37.
40. Individuals applying for exemption from assessment via APCL of other certified learning must provide a copy of the relevant certificate and/or transcript, information on the curriculum outcomes and/or assessment criteria and will need to undertake a mapping exercise to demonstrate which curriculum outcomes the certified learning meets.
41. Previous (recent) certified learning can be submitted as contributing evidence for high-stakes outcomes as part of the portfolio.

Appeals

42. A candidate who reasonably believes that a procedural and/or administrative irregularity may have occurred in the advanced pharmacist credentialing process may submit an appeal.
43. A completed [appeal form](#) or full written statement of the appeal which sets out the grounds for the appeal must be submitted to the Head of Assessment & Credentialing either by email within 28 days of the notification of the assessment results. The appeal fee must also be received by the RPS within this 28-day period.
44. The fees for each appeal are set out in the [appeal form](#). Appeals will not be considered until payment has been received.
45. The RPS will acknowledge receipt of the appeal and associated appeal fee in writing within 10 working days. As part of this acknowledgment, it may also request additional details or information in relation to the candidate's appeal.
46. An appeal can only be made if the candidate reasonably believes that there were **procedural** and/or **administrative irregularities** or **mistakes** in the conduct of the advanced pharmacist credentialing process, which were of such a nature as to cause reasonable doubt about whether the members of the advanced pharmacist competency committee would have reached the same conclusions had the irregularities not occurred.
47. An appeal cannot be made against the judgment of any member(s) of the advanced pharmacist competency committee i.e., a candidate's unsubstantiated opinion that their portfolio has been assessed harshly or incorrectly by member(s) of the advanced pharmacist competency committee will not constitute valid grounds for an appeal.
48. All appeals that meet the definition in Regulations 47-48 will be anonymised and referred to the next available meeting of the Assessment Regulatory Committee.
49. Before coming to a decision, the Head of Assessment and Credentialing may ask anyone involved in the appeal for their observations and may refer the appeal for comment to those who have been immediately concerned with assessing or supporting the appellant. This additional information will be shared with the appellant

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and the appellant will be given the opportunity to comment on the information before the meeting. Any additional comments will be provided to the Assessment Regulatory Committee.

50. The Assessment Regulatory Committee will meet in private and decide on the basis of the documents before it whether to:
 - a) Uphold the appeal; revise the advanced pharmacist competency committee outcome, if it believes from the evidence a procedural and/or administrative irregularity or mistake has occurred;
 - b) Uphold the appeal; expunge the attempt from the appellant's record and refund the original assessment fee, if it believes from the evidence a procedural and/or administrative irregularity or mistake has occurred;
 - c) Refuse the appeal if it believes there is no evidence a procedural and/or administrative irregularity or mistake has occurred.
51. The decision of the Assessment Regulatory Committee is final with regards to appeals.

Complaints

52. This section of the Regulations only covers complaints which do not relate to reconsideration of the outcome of an advanced pharmacist competency committee. Candidates wishing to have the outcome reconsidered should follow the Appeal process set out in Regulations 42-51.
53. A candidate who wishes to complain about any aspect of the advanced pharmacist credentialing process should submit a written report to the Head of Assessment & Credentialing. A complaint will not result in a reconsideration of the competency committee outcome.
54. The Head of Assessment & Credentialing will investigate and respond to the complaint as soon as practicably possible.